



PTO/SB/22 (08-03)

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<b>PETITION FOR EXTENSION OF TIME UNDER 37 CFR 1.136(a)</b>		<b>Docket Number (Optional)</b> 273012010303	
10/20/2004 LVONDIM1 00000055 031952 10825270 02 FC:2252 215.00 DA		In re Application of Ethan D. STERNBERG et al.	
		Application Number 10/825,270	Filed April 14, 2004
		For ETHYLENE GLYCOL ESTERS AS PHOTOACTIVE AGENTS	
		Art Unit 1614	Examiner Not Yet Assigned

This is a request under the provisions of 37 CFR 1.136(a) to extend the period for filing a reply in the above identified application.

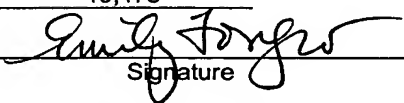
The requested extension and appropriate non-small-entity fee are as follows (check time period desired):

- |                                     |                                  |    |        |
|-------------------------------------|----------------------------------|----|--------|
| <input type="checkbox"/>            | One month (37 CFR 1.17(a)(1))    | \$ |        |
| <input checked="" type="checkbox"/> | Two months (37 CFR 1.17(a)(2))   | \$ | 430.00 |
| <input type="checkbox"/>            | Three months (37 CFR 1.17(a)(3)) | \$ |        |
| <input type="checkbox"/>            | Four months (37 CFR 1.17(a)(4))  | \$ |        |
| <input type="checkbox"/>            | Five months (37 CFR 1.17(a)(5))  | \$ |        |
- ☒ Applicant claims small entity status. See 37 CFR 1.27. Therefore, the fee amount shown above is reduced by one-half, and the resulting fee is: \$ 215.00
- ☐ A check in the amount of the fee is enclosed.
- ☐ Payment by credit card. Form PTO-2038 is attached.
- ☐ The Director has already been authorized to charge fees in this application to a Deposit Account.
- ☒ The Director is hereby authorized to charge any fees which may be required, or credit any overpayment, to Deposit Account Number 03-1952
- ~~I have enclosed a duplicate copy of this sheet.~~ Fee Transmittal form (PTO/SB/17) is attached to this submission in duplicate.

I am the ☐ applicant/inventor.  
☐ assignee of record of the entire interest. See 37 CFR 3.71.  
Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96).  
☐ attorney or agent of record. Registration Number \_\_\_\_\_  
☒ attorney or agent under 37 CFR 1.34(a).  
Registration number if acting under 37 CFR 1.34(a) 46,473

October 14, 2004  
Date

(858) 314-5413  
Telephone Number

  
Signature  
Emily C. Tongco  
Typed or printed name

NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below

<input checked="" type="checkbox"/> Total of 1 forms are submitted.
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I hereby certify that this correspondence is being deposited with the U.S. Postal Service with sufficient postage as First Class Mail, in an envelope addressed to: MS MISSING PARTS, Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450, on the date shown below.

Dated: October 14, 2004

Signature: 

(Rebecca McElroy)